

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	J.B.	70000	7-20-00
O.I.P.E. CLASSIFIER		48	7/23/00
FORMALITY REVIEW	M.H.	625	09-27-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	5/18/05
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	0	0	
6	0	0	
7	0	0	
8	✓	✓	
9	✓	✓	
10	✓	✓	
11	✓	✓	
12	✓	✓	
13	✓	✓	
14	✓	✓	
15	✓	✓	
16	✓	✓	
17	✓	✓	
18	0	0	
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Best Available Copy

If more than 150 claims or 10 actions  
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